	re Report Co					Amendment Yes No
Use this form	m for general report	and committe	ee information, r	nust be signed and sub-	mitted alor	ng with other detailed forms.
	his form to update in	formation.				the state of the s
a. Full Name	ee Information					I. ID No. 1
A .						c. ID Number
	LAWAY FO			NCIL		
	dress (include City, Stat		2)			d. Date Filed
30 t	GRESHAM	AVE				10/02/2017
Dige	HAM, NC	2770	4			e. Phone Number
Delki	14.01, 100	211				919-695-3232
2. Report Y	ear 3. Period Start	Date (mm/dd	/yy) 4. Period I	End Date (mm/dd/yy) 5.	. Treasure	er Full Name
2017	08/30/1			25/17		
6. Type of C	Committee (Check C			ort (check only one ty	ne of reno	ort from one category)
Candidate			Municipal	State/County	1 - J repe	Referendum
☐ PAC	Refe	erendum	Organizationa	l Organization	nal	Organizational
Independe	nt Expenditure 🔲 Join	t Fundraiser	Thirty-five da	y Quarterly		Pre-referendum
Legal Exp	ense Fund		Pre-primary	First		Final
7 T	1 66 8 11		Pre-election	Second		Supplemental Final
7. Type of F Booster Fu		check one)	Pre-runoff Semi-annual	Third Fourth		Annual Special
Building F			Mid Yea	A277000000000		Special
			Year End			10. Special Report Name
Other:			Final	Year Er	nd	
8. Number o	of Fundraisers this	Report	Special	Final		
0				☐ Special		
	Information			11. Account Informa	tion	Burn Burn Burn Burn Burn Burn Burn Burn
a. Financial In	stitution Full Name			a. Financial Institution Fu	ıll Name	
LATINO	COMMUNITY CR	EDIT LINI	on	PAYFAL		
b. Purpose		c. Account Co	de	b. Purpose		c. Account Code
Committee	W Fumb	LATZ	2			PATP
	_	d. Period Begi	n Balance	CAMPAIEN FO	MAD	d. Period Begin Balance
		\$ 992	.04			\$ 150.00
CERTIFICA	ATION					
of the NC G	eneral Statutes and tha	at no funds are	commingled with		disclosed fu	B & 22D-22M of Chapter 163 ands. I further certify that this
BRIE	Printed Name of Signa	wAY er	Big	Collinson	er	10/07/2017 Date
FOR OFFIC	E USE ONLY	1		1.		
Date Rec	ceived: 10	02/17	Employ	vee: <u>MS</u>	Del	ivery Method Normal Mail
Date Pos	stmarked:		Employ	/ee:	日	Registered Mail Hand Delivered OCT 0 2 2017
Date Sca	nned:		Employ	/ee:		Electronically Filedur HAM BOE
Date Data Entered:			Employ	/ee:		Signer has not received mandatory training

CRO-1000

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

NC State Board of Elections

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

August 2008

Disclosure Report Co	over		Amendment			
		must be signed and submitted	Yes No No d along with other detailed forms.			
Do not use this form to update		, must be signed and submittee	along with other detailed forms.			
1. Committee Information						
a. Full Name			c. ID Number			
CALLAWAY FOR	CITY COUNCIL		C 1D Fulliber			
b. Mailing Address (include City, Sta			d. Date Filed			
	-					
307 GRESHAM	AUE		10/02/2017			
Durham, NC	27704		e. Phone Number 919-695-32-32			
2. Report Year 3. Period Star	t Date (mm/dd/yy) 4. Period	End Date (mm/dd/yy) 5. Tres				
2017 08/301		25/17				
6. Type of Committee (Check		eport (check only one type of	francet from one category)			
Candidate Campaign Pa		State/County	Referendum			
			The second secon			
		_	Organizational			
☐ Independent Expenditure ☐ Joi			Pre-referendum			
Legal Expense Fund	Pre-primary	I =	Final			
	Pre-election		Supplemental Final			
7. Type of Fund (if applicable		Third	Annual			
Booster Fund	Semi-annua	-	Special			
☐ Building Fund	Mid Y	ear Semi-annual				
	Year E	End Mid Year	10. Special Report Name			
Other:	Final	Year End				
8. Number of Fundraisers this	S Report Special	☐ Final				
0		☐ Special	IN PERSO			
11. Account Information		11. Account Information	DCT O.D. COM			
a. Financial Institution Full Name		a. Financial Institution Full Nar	me 0 2 201/			
LATINO COMMUNITY	CREDIT UNION	VENMO	DURHAM BO			
b. Purpose	c. Account Code	b. Purpose	c. Account Code			
	LAT		VENM			
CAMPAIGN FUND	d. Period Begin Balance	CAMPAKN FUND	d. Period Begin Balance			
	\$ 98.01		\$ 0.00			
CERTIFICATION	10.21					
	ind is in compliance with all an	plicable provisions of Article 22	A, 22B & 22D-22M of Chapter 163			
of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.						
\mathcal{A}_{-} \mathcal{A}_{-}						
BRIAN CALLAWAY 15 CULLIS 10/02/2017						
Printed Name of Signer Signature of Appointed Treasurer Date						
FOR OFFICE USE ONLY	1 1					
Date Received:	5 02 11 Empl	loyee:	Delivery Method Normal Mail			
Date Postmarked:	loyee:	Registered Mail				
Date Scanned:		loyee:	☐ Hand Delivered ☐ Electronically Filed			
			☐ Signer has not received			
Date Data Entered:	Empl	loyee:	mandatory training			

CRO-1000

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

NC State Board of Elections

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

August 2008

Detailed Summary	Amendment Yes No		
Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)	to total mo	netary information	The state of the s
	2. Type of		. ID Number
CALLAWAY FOR CITY COUNCIL	Pre-Pr	•	
Start of Election Cycle: January 1, 2017	<u>-</u>	Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start		\$ 1240.05	\$ 0
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	s	s —
6) Contributions from Individuals	(CRO-1210)	\$ 942.57	\$ 4670.01
7) Contributions from Political Party Committees	(CRO-1220)	\$ -	\$ —
8) Contributions from Other Political Committees	(CRO-1230)	S	\$
9) Loan Proceeds	(CRO-1410)	s -	\$ -
10) Refunds/Reimbursements to the Committee	(CRO-1240)	s <u> </u>	s
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$ 0.05
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$ ~
11c) Outside Sources of Income	(CRO-1250)	s –	\$ <u>_</u>
11d) Legal Expense Fund - Other Sources	(CRO-1270)	s —	S -
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$ _
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	lld and lle)	\$ 942.57	s 4670.06
EXPENDITURES		7,000	
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 449.03	\$ 459.63
13b) Contributions to Candidates/Political Committees	(CRO-1310)	s	\$
13c) Coordinated Party Expenditures	(CRO-1310)	S	\$ -
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ ~	\$ ~
15) Loan Repayments	(CRO-1420)	\$ —	s —
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	s —
17) In-Kind Contributions	(CRO-1510)	\$ 842.57	\$ 3320.01
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	, 16 and 17)	\$ 1291.60	\$ 3779.04
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 891.02	\$ 891.02
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	S	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	s —	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ -	
23) Debts and Obligations owed to the Committee	(CRO-1620)	s —	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 98.01	
25) Administrative Support	(CRO-1710)	\$ -	s —
the state of the s	(CRO-1710) (CRO-1440)	\$ -	s
26) Forgiven Loans	· · · •		

Cont	tributions f	rom Individua	ıls	Pg	of 7	Amendment Yes No	
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used							
٠		LEAGLE LOUGH FRANC	-	**************************************		210 Number 200	
		FOR CITY C	our !				
20174 5-20-0-20-0-1	(C) by Core In (Ore)			Add Rei			
	lame, Mailing Addro de city, state, & zip)			b. Job Title/Profes		d. Comments	
	IAN CALL			Entroy M			
_	imo Corul 7 GRESSIAN			c. Employer's Nan	me/Specific Field		
	ertan, NC			Durethin Per		e. Election Sum to Date	
90	7.695.32	32		ScHOO	الج	\$ 3398.01	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ition	j. Date (mm/dd/yyy	yy) k. Amount	
	_~	IN-KIND	PRINTED F	LIERS	09/01/2017	7 \$ 803.00	
		In-KIND		SOLVKES	,	7 \$ 12.58	
		IN-KIND	Saumesence	WEB HOSTIAL	09/03/2015	7 8 16.00	
The state of the state of	leibykae luftryns		.		noye	4	
•	ame, Mailing Addre le city, state, & zip)			b. Job Title/Profes	ssion	d. Comments	
	arctis Wa			DOLTOR			
	3 WILSON			c. Employer's Nam	ne/Specific Fleld]	
· -	Hom, NC			Duke line	INDOSTY	e. Election Sum to Date	
_	1.684.81	-			F MEDIUME		
	-		i. In-Kind Descript	<u>i</u>	j. Date (mm/dd/yyy		
	PAYP	ELECTIONIC		ПОП		\$ 100,00	
					-	\$	
						S	
Control of Carolin	ribujer Informa			Add □ Ren		The second se	
	ame, Mailing Addre: le city, state, & zip)	ss & Phone		b. Job Title/Profess		d. Comments	
A	EXAMBRA VI	ALI ADALES		PROGRAM			
	EAST ELU			c. Employer's Nam	te/Specific Field		
Pm	AHHM, NO	c 27704		DUKE UMVERSITY C.		e. Election Sum to Date	
91	9.949.60	020		SCHOOL OF	MEDILINE	\$ 6.00	
	g. Account Code	h. Form of Payment	i. In-Kind Descript		j. Date (mm/dd/yyyy		
		IN-KIND	FALEBOOK AT	DVECTISING	09/04/201	7 5 6.00	
					l	s	
						\$	
A THE RESERVE AND A PROPERTY.	al only this Pa	tel Mario (ACRIC) and Acric and Acri				s 937.58	
\$25.00 BY WINDOW	· · · · · · · · · · · · · · · · · · ·	CO-1210 Pages of Detailed Summery Page	ue CRO-1100)			s 942.57	

Amendment

Amendment **Contributions from Individuals** $P_g 2$ of $2 \square Y_{es}$ □ No Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used Considities and Sense (and Cond. Cond. Capplicable) CALLAWAY FOR LITY CONNYL Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) ENERLY MANAGER BRIAN CAMANAY c. Employer's Name/Specific Field 307 GRESHAM AVE Duraton Public e. Election Sum to Date Duanam, NC 27704 919. 695. 3232 SCHOOLS \$ 3398.01 j. Date (mm/dd/yyyy) k. Amount i. In-Kind Description \$ 4.99 09/20/207 IN-KIND EMAIL SERVICES 3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) c. Employer's Name/Specific Field e. Election Sum to Date f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/vyvy) k. Amount S П 3. Contributor Information Add Remove . Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) c. Employer's Name/Specific Field e. Election Sum to Date f. Prior g. Account Code h. Form of Payment i, In-Kind Description j. Date (mm/dd/yyyy) k. Amount

4. Total only this Page

5. Total of ALL CRO-1210 Pages

(This line wifet be on line 6 of Detailed Summary Page CRO-1100)

4.99

942.57

\$

Disbursen	nents			Pg \	f Z Amendment		
Use this form to	o report expenditures	from the commi	ttee for operating ex	openses, contribu	tions to candidate/political		
committees and	i coordinated party ex	<u>kpenaitures</u>					
_	Will Name (and Ken	d if applicable)			2 ID Number		
CALL	AWAY FOR	e City	COUNTIL				
		are remains es	(CEDIO CENTRAL		kursement.)		
Operating Exp			lates/Political Committee		ordinated Party Expenditures		
4.19 Ayer Infor			A STATE OF THE PARTY OF THE PAR	Remove			
d. Full Ivalle, iv	failing Address & Ph	ione	b. Coordina	ted Committee Nam			
<u>~</u>	Boosting content						
160 L	ILLOW ROAD	*	c. Level Reg	istered (Specify) County:	displayed on site		
MANIE	PARK, CA	HADE NUE	I= .	=	ality: c. Election Sum to Date		
PHONE N		1-125-1-10		<u> </u>	s 28.88		
		h Pumasa Cada	1.5.	1.			
PAYP	g. Form of Payment ELECTRANIC	h. Purpose Code	i. Date (mm/dd/yyyy)		k. Required Remarks		
		<u> </u>	08/31/2017		Online advertising		
PAYP	ELEGROME	L A	09/24/2017		Online advertising		
4. Payee Inform	eation ing Address & Phone			Remove			
(include city, sta			b. Coordinat	ted Committee Nam			
STILLER	· · · 	···			Stichers for		
411 LAFA	HYETTE ST - 6	th FLOUR	c. Level Regi	istered (Specify) County:	premeton		
NEW YOU	ek, NY 109	03	☐ State	Municipa	e. Election Sum to Date		
718.21					s		
		h. Purpose Code	i. Date (mm/dd/yyyy)	1: 4	k. Required Remarks		
	DEBIT CARD CALIN		09/06/2017		Shiher's		
	3-01 -Jap 0.	2,9	0.7007001	6	3112		
4. Payce Inform	edou **: see see see		 	Remove			
The second secon	ing Address & Phone			ed Committee Name	d. Comments		
(include city, stat	te, & zip)						
FEDEX	DEFILE		c Level Pooi	stered (Specify)			
ALC NIN	TH ST , NL 27705		Federal	County:			
During	NL 27705	-	State	== -	dity: e. Election Sum to Date		
919.286	. 1600				S		
		h. Purpose Code	i. Date (mm/dd/yyyy)	l: Amount	k. Required Remarks		
LAT2	DESIT CARD	В	09/12/2017		Printed materials		
1.AT2	DEGIT CARD	B		\$32.09	Lamination of materials		
5. Total only th				24-01	200 C 200		
		<u> </u>			\$ 445.83		
Land to the control of the control o	CRO-1310 Pages line 13a of Detailed Sum	P CBO 17	10 is 0i E		11119 02		
	une 13a of Detailed Sum tine 13b of Detailed Sum				s 449.03		
	line 13c of Detailed Sum						
7. Hunpose Co	des (List detailed	expenditure code	in (h.) ábove)				
A* - Media	B* - Printin	g	C* - Fundraising		Another Candidate		
E - Salaries	F* - Equipa		G - Political Party		olding Public Office Expenses		
I - Postage O* Other	J - Penaltie	es .	K* - Office Expen	ses Q* - Do	onation to Legal Expense Fund		
	e detailed explanatio	on in required r	emarks field (k)				
CRO-1310	A STATE OF THE STA		State Board of Elections	ementalisma and but the that delicate and the second	December 2009		

Amendment

Disbursements	Pg	_2

				Amendment	
Pg	7	of	<u> </u>	☐ Yes	□ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	AND THE COM			- V 1808			inier.
	way FOR (
	ajsenea (Claus	A Name of the Control	735241352 20172 800-000	Control of the Contro	- Carlotte and Carlotte Carlotte Control Carlotte Carlott	The state of the s	
Operating Exp		tributions to Candid	ates/Politic		Remove.	rdinated Party E	ependitures
CONTROL OF THE PROPERTY OF THE	lailing Address & Pho	nπe)	STATE OF THE PARTY	ed Committee Name	d. Comme	ents
(include city, state,	-					15-14	assantal
PAYPAL							h culine donor
224 M	RTH FIRST STA		c. Level Regis	stered (Specify) County:	LEN	tribution	
3nn Jose, CA 95131				State	Municipa	lity: e. Election	ı Sum to Date
	221.1161					\$ 3-	20
f. Account Code	g. Form of Payment	h. Purpose Code		mm/dd/yyyy)		k. Required Re	emarks
PAYP	AND/ELEGEONE	C	09/19	8/2017	\$ 3.20	FEES FOR	DOVINE DOUNTIEN
					\$		
4. Payee Inforp	nation			Add . 🔲	Remove		Apple of the second of the
a. Full Name, Mail	ing Address & Phone			b. Coordinate	ed Committee Name	d. Comme	ents
(include city, sta	te, & zip)						
				c. Level Regis	stered (Specify)		
				☐ Federal	County:		
				State	Municipa Municipa	lity: e. Election	Sum to Date
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f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (nm/dd/yyyy)	j. Amount	k. Required Re	emarks
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	ing Address & Phone		X . Z .	The state of the s	ed Committee Name	d. Comme	ents
(include city, sta	te, & zip)						
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5. Total easy th	ie Does					S 3	.20
	. CRO-1310 Pages				er engliggering		<u> </u>
	line 13a of Detailed Sun	mary Page CRO-1	100 if Ope	ratine Expense	es)	, Lu	19.03
· ·	line 13b of Detailed Sun)	11.00
(This line goes in	line 13c of Detailed Sun	nmary Page CRO-11	00 if Coo	rdinated Party	Expenditures)		
And the second s	odes (List detailed				es de la constantación	il gradini za stan	Barrier Barrier
A* - Media	B* - Printi	_		undraising		Another Cand	
E - Salaries I - Postage	F* - Equip J - Penalti			litical Party ffice Expen			: Office Expenses egal Expense Fund
O* Other	J - i cilatu	O.S.	11 - 0	THE EMPER		LIGHTON EV LA	Som multiprins a serie
	re detailed explanat	on in required	remark	field (k)			

In-Kind Contributions	Pg	of	Amendment Yes No
Use this form to report non-monetary contributions, donations, good Use CRO-1215 if In-Kind Contributions were or will be refur	ds or services provi	ided to the commit	
Use CRO-1213 if in-Kind Contributions were or will be return	ided within / day	/S.	L.TO Namber
CALLAWAY FOR CITY COUNCI			
3. Contributor Information	Add Ref	tune.	
a. Full Name, Mailing Address & Phone	b. Type of Contrib		c. Comments
(include city, state, & zip)	Individual Candidate		
BRIAN CALLANAY	Party		:
307 GRESHMM AVE	PAC		
Director, NC 27704	Referendum Other Receipt	Source	d. Election Sum to Date
919.695.3232			s 3298.01
e. Description		f. Date (mm/dd/yyy	y) g. Fair Market Amount
Printed door-hangers for convessing		09/01/2017	
Email and was sorvices from 600	gle (monthly)	09/01/2017	r \$ 12.58
Web hosting services from Squarespor	ec (monthly)	09/03/2017	\$ 16.00
3. Contributor Information	Add Ren	BOVE	
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of Contrib	utor	c. Comments
	Candidate		
BAIMN CALLAWAY	Party PAC		
307 GARSHAM AVE	Referendum		d. Election Sum to Date
Dunutam, NC 27704	Other Receipt	Source	S
911,695,3232 e. Description		f. Date (mm/dd/yyy	
		_	
Emnil services for domain by 60Dadd7	(monthly)	09/20/201	7 54.99
·			s
			s
3. Contributor Information	Add Ren	nove	
a. Full Name, Mailing Address & Phone	b. Type of Contrib	utor	c. Comments
(include city, state, & zip)	Individual Candidate		
ALEXANDRA VALLADARES	Party		
IIII EAST ELLEABEE ST	PAC Referendum		d. Election Sum to Date
Durstan, NC 27704	Other Receipt	1	
919.949.6020			\$
e. Description		f. Date (mm/dd/yyy)	
Facebook advertising fees to "boost" p	ublic posts	09/04/201	17 \$ 6.00
			\$
			\$
4. Total only this Page			\$ 842,57
5. Total of ALL CRO-1510 Pages			s 842.57

	Account Transfers Within the Committee Page of Yes No Use this form to transfer money between multiple bank, depository or credit accounts.						
		ee Full Name (and Fund if	2. ID Number				
		AWAY FOR C					
_		Information					
a. A	mend	b. Account Code	c. Account Code	d. Date (mm/dd/yyyy)	e. Amount		
L		Transferred From	Transferred To				
ᆸ	Add Remove	LAT	LAT2	09/18/2017	s 98.01		
H	Add Remove				S		
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吕	Remove Add				s		
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4		nly this Page			5 98 01		
		f ALL CRO-1720 Pag	es		s 98.01		
		ust be on line 24 of Detailed Summ			3 73.01		

Amendment